

DECLARATION
AND POWER OF ATTORNEY

ORIGINAL APPLICATION



05100

PATENT TRADEMARK OFFICE

DOCKET NO. GC627-2

AS A BELOW NAMED INVENTOR, I HEREBY DECLARE THAT:

MY RESIDENCE, POST OFFICE ADDRESS AND CITIZENSHIP ARE AS STATED BELOW NEXT TO MY NAME. I BELIEVE I AM THE ORIGINAL, FIRST AND SOLE INVENTOR (IF ONLY ONE NAME IS LISTED BELOW) OR AN ORIGINAL, FIRST AND JOINT INVENTOR (IF PLURAL NAMES ARE LISTED BELOW) OF THE SUBJECT MATTER WHICH IS CLAIMED AND FOR WHICH A PATENT IS SOUGHT ON THE INVENTION ENTITLED BACILLUS TRANSFORMATION, TRANSFORMANTS AND MUTANT LIBRARIES, THE SPECIFICATION OF WHICH

CHECK ONE:

☒ IS ATTACHED HERETO

☐ WAS FILED ON _____ AS APPLICATION SERIAL NO. _____.

I HEREBY STATE THAT I HAVE REVIEWED AND UNDERSTAND THE CONTENTS OF THE ABOVE IDENTIFIED SPECIFICATION, INCLUDING THE CLAIMS, AS AMENDED BY ANY AMENDMENT REFERRED TO ABOVE. I ACKNOWLEDGE THE DUTY TO DISCLOSE INFORMATION WHICH IS MATERIAL TO PATENTABILITY AS DEFINED IN TITLE 37, CODE OF FEDERAL REGULATIONS §1.56.

I HEREBY CLAIM FOREIGN PRIORITY BENEFITS UNDER TITLE 35, UNITED STATES CODE §119, OF ANY FOREIGN APPLICATION(S) FOR PATENT OR INVENTOR'S CERTIFICATE LISTED BELOW AND HAVE ALSO IDENTIFIED BELOW ANY FOREIGN APPLICATION FOR PATENT OR INVENTOR'S CERTIFICATE HAVING A FILING DATE BEFORE THAT OF THE APPLICATION ON WHICH PRIORITY IS CLAIMED.

APPLICATION NUMBER	COUNTRY	DATE OF FILING	PRIORITY CLAIMED	
			YES	NO

I HEREBY CLAIM THE BENEFIT UNDER TITLE 35, UNITED STATES CODE §120, OF ANY UNITED STATES APPLICATION(S) LISTED BELOW AND, INSOFAR AS THE SUBJECT MATTER OF EACH OF THE CLAIMS OF THIS APPLICATION IS NOT DISCLOSED IN THE PRIOR UNITED STATES APPLICATION IN THE MANNER PROVIDED BY THE FIRST PARAGRAPH OF TITLE 35, UNITED STATES CODE §112, I ACKNOWLEDGE THE DUTY TO DISCLOSE MATERIAL INFORMATION AS DEFINED IN TITLE 37, CODE OF FEDERAL REGULATIONS §1.56(A) WHICH OCCURRED BETWEEN THE FILING DATE OF THE PRIOR APPLICATION AND THE NATIONAL OR PCT INTERNATIONAL FILING DATE OF THIS APPLICATION.

APPLICATION NUMBER	DATE OF FILING	STATUS - PATENTED, PENDING OR ABANDONED
60,224,948	AUGUST 11, 2000	PENDING

POWER OF ATTORNEY: AS A NAMED INVENTOR I HEREBY APPOINT AS MY ATTORNEY(S) WITH FULL POWER OF SUBSTITUTION AND REVOCATION, TO PROSECUTE THIS APPLICATION AND TRANSACT ALL BUSINESS IN THE PATENT AND TRADEMARK OFFICE CONNECTED THEREWITH:

MARGARET A. HORN, REG. NO. 33,401
CHRISTOPHER L. STONE, REG. NO. 35,696
RICHARD T. ITO, REG. NO. 32,242
VICTORIA L. BOYD, REG. NO. 43,510

SEND CORRESPONDENCE TO:
VICTORIA L. BOYD
 GENENCOR INTERNATIONAL, INC.
 925 PAGE MILL ROAD
 PALO ALTO, CA 94304-1013

DIRECT TELEPHONE CALLS TO:

(650) 846-7615

201

FULL NAME OF INVENTOR	FULL FIRST NAME MARIA	INITIAL R.	LAST NAME DIAZ-TORRES	
RESIDENCE & CITIZENSHIP	CITY LOS GATOS	STATE OR FOREIGN COUNTRY CALIFORNIA		COUNTRY OF CITIZENSHIP SPAIN
POST OFFICE ADDRESS	POST OFFICE ADDRESS 142 JOHNSON AVENUE	CITY LOS GATOS	STATE OR COUNTRY CALIFORNIA	ZIP CODE 95030

202

FULL NAME OF INVENTOR	FULL FIRST NAME EDWIN	INITIAL W.	LAST NAME LEE	
RESIDENCE & CITIZENSHIP	CITY SAN FRANCISCO	STATE OR FOREIGN COUNTRY CALIFORNIA		COUNTRY OF CITIZENSHIP U.S.A.
POST OFFICE ADDRESS	POST OFFICE ADDRESS 239 SWEENEY STREET	CITY SAN FRANCISCO	STATE OR COUNTRY CALIFORNIA	ZIP CODE 94134

203

FULL NAME OF INVENTOR	FULL FIRST NAME THOMAS	INITIAL B.	LAST NAME MORRISON	
RESIDENCE & CITIZENSHIP	CITY PALO ALTO	STATE OR FOREIGN COUNTRY CALIFORNIA		COUNTRY OF CITIZENSHIP U.S.A.
POST OFFICE ADDRESS	POST OFFICE ADDRESS 3767 REDWOOD CIRCLE	CITY PALO ALTO	STATE OR COUNTRY CALIFORNIA	ZIP CODE 94306

204

FULL NAME OF INVENTOR	FULL FIRST NAME VOLKER	INITIAL	LAST NAME SCHELLENBERGER	
RESIDENCE & CITIZENSHIP	CITY PALO ALTO	STATE OR FOREIGN COUNTRY CALIFORNIA		COUNTRY OF CITIZENSHIP GERMANY
POST OFFICE ADDRESS	POST OFFICE ADDRESS 914 MORENO AVENUE	CITY PALO ALTO	STATE OR COUNTRY CALIFORNIA	ZIP CODE 94303

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FULL NAME OF INVENTOR	FULL FIRST NAME OLGA	INITIAL V.	LAST NAME SELIFONOVA	
RESIDENCE & CITIZENSHIP	CITY PLYMOUTH	STATE OR FOREIGN COUNTRY MINNESOTA		COUNTRY OF CITIZENSHIP RUSSIA
POST OFFICE ADDRESS	POST OFFICE ADDRESS 1405 OLIVE LANE NORTH, APT. 318	CITY PLYMOUTH	STATE OR COUNTRY MINNESOTA	ZIP CODE 55447

FOOTNOTES

I FURTHER DECLARE THAT ALL STATEMENTS MADE HEREIN OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE , AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION OR ANY PATENT ISSUING THEREON.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202
DATE	DATE
SIGNATURE OF INVENTOR 203	SIGNATURE OF INVENTOR 204
DATE	
SIGNATURE OF INVENTOR 205	
DATE	

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